Statement of Organization - Candidate Committee Use this form to create a new or update an existing candidate committee.

Amendment ☐ Yes □ No

This form must be accompanied by forms CRO-3100 and	CRO-3500 (when am	ending, only	re-submit if annlicable)
ri Contitutetee think mistinii		Janes, only	re-submit it applicable).
a. Full Name			c. ID Number
b. Mailing Address (include City, State and Zip Code)	A Sau	tim	
b. Mailing Address (include City, State and Zip Code)	a de carre	Lagivit	d. Date Organized
80 BX		***	
267			12-9-2015
Shallotte, NC 28459		e. Phone Number	
2. Candidate Information			910-754-8417
a. Full Name	I C TI TI	Candidate'	s Primary Committee
	e. Candidate ID Numb)er	f. Party Affiliation
Harry E. Lemon JR			Undicate Non nombre 15
b. Mailing Address (include City, State, and Zip Code)	g. Office Sought		(Indicate Non-partisan if applicable
same as above	Board	of E	Lucation
c . Phone Number d. Email Address	h. Next Election Year		risdiction
710-754 8412 edlemone ymail.com	2016		
3. Treasurer Information			
a. Full Name	4. Custodian of Bo	oks Informa	tion
Same as about.	a. Full Name		
b. Mailing Address (include City, State, and Zip Code)	b. Mailing Address (inc	Inde City State	and Tin Code
POBOX 267 Shallotte NC			, and 2.p Code)
c. Phone Number d. Email Address	c. Phone Number	d. Email Addre	38
910-7548412 edleman @ gmal. com			
prefer to receive notices by email Yes No	Email copy of	notices	
Add Add	6. Account Informa	tion (incl.	CRO-3500) Add
. run Name	a. Financial Institution I	Full Name	Remove
	Birst Citi	2005	
. Mailing Address (include City, State, and Zip Code)	b. Purpose	9.00	
	Campaig	n Gn	mittee
Phone Number d. Email Address	c. Account Code d	. Туре	
			L'
Email copy of notices	4160	chec	-King
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct. Han E Leman IR Printed Name of Signer Signey of Appointed Statutes and Signer Signey of Appointed Statutes and Statutes and Signey of Appointed Statutes and Sta			
Printed Name of Signer Signature of Appointed Treasurer Date			

CRO-2100A Mailed 3500

NC State Board of Elections

July 2011



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Treasurer

This Certification is used by Candidate Committees to appoint a treasurer for the committee. This form is required and must accompany the Candidate's Statement of Organization.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

Harry E. Lemon Jr	
same as whome	
PO Box 267	
Shallotte, NC 28459	
910-754-8417	

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

12-9-2015 Date Signed

Signature of Candidate



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director

FILED BY:

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

Certification of Threshold

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

This Certification is filed at the Board of Elections office where the committee's campaign reports are filed.

TILLU DI.		
Committee Name:	Ed hemon for board of Education	
Treasurer Name:	Harry E. Lemm JR	
Treasurer Address:	PO BOX 267	
(include city, state, & zip)	Shallotte, NC 28458	
Treasurer Phone:	910-754-8412	
Check One: I certify that this committee intends to neither receive nor expend more than \$1,000 during the current election cycle under the procedures set forth in G.S. 163-278.10A. This certification will remain in effect until the end of the election cycle for this committee. If this committee exceeds \$1,000 in contributions or expenditures during this election cycle, I understand that I must immediately notify the appropriate board of elections and file required campaign finance reports. THIS DECLARATION CAN ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE. I am withdrawing my Certification to remain at or under the \$1,000 threshold. I will now be required		
to file the next scheduled i	report for all contributions and expenditures that have not been previously	
reported from the beginning	of the current election cycle. I further agree to file all future reports required.	
12-9-2015	H. E. Leven Ir	
Date Signed	Signature	



North Carolina

State Board of Elections

441 N Harrington Street Raleigh, NC 27603

Kim Westbrook Strach Executive Director

CRO-3900

Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173

July 2014

Candidate Designation of Committee Funds

This form is used by candidate committees only and allows the candidate to designate in the event of their death, how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a).

how the committee's funds are to be disbursed using the eight allowable methods outlined in 163-278.16B(a). This Designation is filed at the Board of Elections office where the committee's campaign reports are filed.				
				Candidate Name:
Committee Name:	Ed Leman For Board of Education			
Treasurer Name:	Harry E. Lemon Ja			
If Candidate is own treasurer, designate an agent to carry out designations:				
Committee ID #:				
Level Registered: [State] [County] If county, specify: Or was with				
I, Horry E. Lemwyr, hereby direct that in the event of my death or incapacity all (Name of Candidate) funds remaining in my Campaign Committee account(s) (after payment of permitted outstanding debts or reasonable expenses for winding up the Committee or closing office) be paid in the following manner as permitted by N.C. Gen. Stat. 163-278.16B(a).				
(Select from	Plan for Disbursement (eg. Amount or %) Fram, by Assistance Oo 76			
2				
3				
	I certify that the foregoing entities are eligible beneficiaries under N.C. 16B(a). A copy of this form should be maintained with the Committee e:			
Date:	12-9-15			

Candidate Designation of Committee Funds